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APPLICANTS

Christopher J. Barbazette, Gilroy, CA;

Daniel J. Fritschen, Sunnyvale, CA;

** CONTINUING DATA *(X)*** FOREIGN APPLICATIONS *(X)*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 10/08/2003

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no				
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature <i>(Signature)</i> Initials <i>(Initials)</i>				
		STATE OR COUNTRY CA	SHEETS DRAWING 6	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 3

ADDRESS

33864
 O'MELVENY & MYERS, LLP
 275 BATTERY STREET
 SUITE 2600
 SAN FRANCISCO, CA
 94111-3305

TITLE

Data collection and diagnostic system for a semiconductor fabrication facility

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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